SERVICE APPLICATION CITY OF NEWTON, NORTH CAROLINA

Type of Request:	☐ DISCONNECTION ☐ TEMPORARY CONNECTION ☐ TEMPORARY DISCONNECTION		
Type of Service:	Water (Outside)	rea Light \ \\Sewer (Inside) Tipping Fee	Sewer (Outside)
Applicant Name:	(Last)	(First)	(Middle)
Service Address:			
Telephone Numbers: (W)(H)			
Mailing Address (If	different from service	address):	
Forwarding Address	s:		
date of disconnecti any remaining mos Should I still owe t understand that if	anderstand that I will in the control on the contro	le will be first applie e forwarded at the ea I will be billed accorded, the City of Newton	d to the final bill and arliest possible time.
Applicants Signatur	re:		
Spouse/Co-Applica	nts Signature:		
Date of Application	; <u></u>	Account Nu	ımber:
Date requested to be	e completed:		